Date

	Please type a plus sign (+) inside this box ▶ +		U.S. Pate	ent and Trademark Office; U.	through 10/31/02. OMB 0651-0031 S. DEPARTMENT OF COMMERCE			
/	Under the Paperwork Reduction Act of 1995, n	io persons ar	Application Number	isplays a valid OMB control number.				
	TRANSMITTAL		Filing Date	December 13, 2001				
	CT 3 1 2003 (g) FORM		First Named Inventor	Pablo I. Rovira				
OKIEN.	1		Group Art Unit	2877				
	A Transition of the Indiana American Indiana American Indiana American Indiana American Indiana American Indiana Indiana American Indiana Indi	al filing)	Examiner Name	Samual A. Turner				
	i Total Number Of Pages in This Submission	8 + 2 Refs	Attorney Docket No.	NAN051 US (7.00)				
		ENCLOS	URES (check all that	apply)	100			
	Fee Transmittal Form (in duplicate)		ignment Papers an Application)	After All Group	owance Communication to			
	Fee Attached	Dra	wing(s)		Communication to Board of and Interferences			
	Amendment / Reply (9 pages + 2 page attachment of replacement sheets of Drawings)	Lice	ensing-related Papers	Communication to Group Notice, Brief, Reply Brief)				
	After Final	Pet	ition	tary Information				
	Affidavits/declarations		on to Convert to a Status Letter					
÷	Extension of Time Request	Pre	ver of Attorney, Revocation of vious Powers; And Statemer der 37 CFR 3.73(b)	inclosure(s) (please identify Receipt Postcard form 1449 (1 page) Card Payment Form (1 page				
		Teri	minal Disclaimer					
	Express Abandonment Request	Red	quest for Refund	ng payment of \$180.00)				
	Information Disclosure Statement (2 pages)	CD,	Number of CD(s)	ECHN				
	Certified Copy of Priority Document(s)	Remarks			non Aon SEC			
	Response to Missing Parts/ Incomplete Application)EI				
	Response to Missing Parts under 37 CFR 1.52 or 1.53				DTOGA CEHLFU KOZ ZI AOW SECENIZOLIE			
	under 57 GTN 1.32 GT1.33				0082 N			
	SIGNATU	SIGNATURE OF APPLICANT, ATTORNEY OR AGENT						
	Firm Michael J. Halb	ert (Reg.	No. 40,633)					
	or Silicon Valley Pa		<u> </u>					
	Individual Name		oulevard, Suite 360					
	Santa Clara, Ca	_						
	Signature Maria	Seel	9 Halle					

Express Mail Label No.: ER 309 272 287 US

EEE TOANGMITTAL	Complete if Known					
OFFEE TRANSMITTAL	Application Number	10/016,943				
TOR FY 2004	Filing Date					
(OCT 3 1 2003)	First Named Inventor Pablo I. Rovira					
Palent fees are subject to annual revision		Group Art Unit	2877	020		
Patent fees are subject to annual revision.		Examiner Name	Samual A. Turner	7>003		
TOTAL AMOUNT OF PAYMENT	(\$)180.00	Attorney Docket No	NAN051 US			

TOTAL AMOUNT OF PAYMENT		(\$)180.0	0	Attorney Docket No		NAN051 US					
METHOD OF PAYMENT 1. V The Commissioner is hereby authorized to charge any			FEE CALCULATION (continued)								
1. The Commissioner is hereby authorized to charge any underpayment or credit any overpayments to:				3. ADDITIONAL FEES							
Deposit Accoun Number	50-2		ny overpayments to:	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee [Description		Fee Paid
Deposit Accoun	Silicon	Valley Pa	tent Group LLP								
				1051	130	2051	65		rcharge - late filing fee or oath rcharge - late provisional filing		
				1052	50	2052	25	fee or	cover sheet		
				1053	130	1053	130	Non-English specification For filing a request for ex gade			
2. X Payment Enclosed:				1812	2,520	1812	2,520	For filing a request for ex parte reexamination			
☐ Check	k 🗵 Cred	dit Card	☐ Money Order ☐ Other	1804	920*	1804	920*		sting publication of S miner action	SIR prior	
	1	FEE CALC	CULATION	1805	1,840°	1805	1,840*	Requesting publication of SR after Examiner action			
1. BASIC	BASIC FILING FEE		1251	110	2251	55		sion for reply within fi	-74		
				1252	420	2252	210	Extens month	sion for reply within s	econd 5	
Large Fee Code	Fee Fe	nail Entity e Fee ode (\$)	Fee Description	1253	950	2253	475	Extens	sion for reply within th	hird? _	
3333	(0)	(4)	Paid	1254	1,480	2254	740	Extens month	sion for reply within fo	ourth C	D
1001	770 20	01 385	Utility filing fee	1255	2,010	2255	1,005		sion for reply within fi	fth month	2
1002	340 20	002 170	Design filing fee	1401	330	2401	165	Notice	of Appeal	न ह	5 ii
1003		003 265	Plant filing fee	1402	330	2402	165	Filing	a brief in support of a	an-appeal C	
1004	770 20	004 385	Reissue filing fee	1403	290	2403	145		st for oral hearing	$\tilde{\mathcal{C}}$	
1005	160 20	005 80	Provisional filing fee	1451	1,510	1451	1,510	Petitio proces	n to institute a public	. FE	
				1452	110	2452	55		n to revive - unavoid	able	
		;	SUBTOTAL (1) (\$)0.00	1453	1,300	2453	650	Petitio	n to revive - unintent	ional	
2. EXTR	A CLAIM FEI			1501	1,330	2501	665	Utility	ssue fee (or reissue)	
	Extra Fee from Fee Paid Claims below		1502	480	2502	240	Design	Design issue fee			
Total Claims	- 20**	= 0	x 9 = \$0	1503	640	2503	320	Plant i	ssue fee		
Independent Claims	- 3**	= 0	x 43 = \$0	1460	130	1460	130	Petitions to the Commissioner		ner	
Multiple Dep	pendent	0	140 = \$0	1807	50	1807	50	applica		nal	
				1806	180	1806	180		ssion of Information sure Statement		180.00
Large Fee Code	Fee Fe	nall Entit e Fee ide (\$)	y Fee Description	8021	40	8021	40		ding each patent ass operties (times numb ties)		
1202	18 22	02 9	Claims in excess of 20	1809	770	2809	385	rejection	a submission after fir on R § 1.129(a))	nal	
1201	88 22	01 43	Independent claims in excess of 3	1810	770	2810	375	For ea	ch additional inventioned (37 CFR § 1.129		
1203	290 22	03 145	Multiple dependent claims, if not paid	1801	750	2801	385	Reque (RCE)	st for Continued Exa	mination	
1204	86 22	04 43	**Relssue independent claims over original patent	1802	900	1802	900	Reque	st for expedited exam	nination	
1205	18 22	05 9	**Reissue claims in excess of 20 and over original patent					of a design application			
					Other fee (specify)						
		SUBTOTAL (2) (\$)0.00									
** or number previously paid, if greater; For relssues, see above.			*Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$)0.00					
SUBMITTE	BMITTED BY Complete (if applicable)										
Name (Print/Type) Michael J. Halbert				(Atton	tration N ney/Age		40,633		Telephone (4	408) 982	-8200 ext. 2
Signature Will 9 Hill								1, 2003			